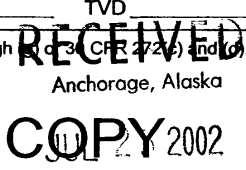


**MINERALS MANAGEMENT SERVICE  
APPLICATION FOR PERMIT TO DRILL (APD)**

Submit original plus three copies with  
one copy marked "Public Information"

OMB No. 1010-0044  
Expiration Date: September 30, 1999

1. Original <input checked="" type="checkbox"/> Correction _____	2. API WELL NUMBER	3. WELL NUMBER  <b>McCovey No. 1</b>	11. OPERATOR NAME AND ADDRESS (Submitting Office)  <b>EnCana Oil &amp; Gas (USA), Inc. 3601 C Street, Suite 1334 Anchorage, Alaska 99503</b>	
8. FIELD NAME <b>McCovey</b>	9. UNIT NUMBER <b>750100001X</b>	10. MMS OPERATOR NUMBER <b>02547</b>		
<b>WELL AT TOTAL DEPTH</b>				
17. WELL LOCATION AT TOTAL DEPTH (Estimated) <b>Lat 70 deg 31 min 34 sec N Long 148 deg 11 min 19 sec W</b>		4. LEASE NUMBER <b>OCS-Y-1578</b>	5. AREA NAME <b>McCovey Unit</b>	6. BLOCK NUMBER <b>475</b>
		7. OPD NUMBER <b>Beechey Point NR6-3</b>		
<b>WELL AT SURFACE</b>				
12. WELL LOCATION AT SURFACE (Estimated) <b>Lat 70 deg 31 min 44 sec N 148 deg 10 min 41 sec W</b>		13. LEASE NUMBER <b>OCS-Y-1577</b>	14. AREA NAME <b>McCovey Unit</b>	15. BLOCK NUMBER <b>475</b>
		16. OPD NUMBER <b>Beechey Point NR6-3</b>		
18. WATER DEPTH (Estimated)  <b>35 feet MLLW</b>	19. ELEVATION AT KB (Estimated)  <b>136 feet Above Mean Sea Level</b>	20. RIG NAME  <b>Fairweather SDC</b>		21. RIG TYPE  <b>Arctic Submersible MODU</b>
22. TYPE OF WELL:  EXPLORATORY <input checked="" type="checkbox"/> DEVELOPMENT _____	23. SPUD DATE (Proposed)  <b>November 15, 2002</b>		24. TOTAL DEPTH (Proposed)  MD _____ TVD _____	
25. ATTACHMENTS (Attach complete well prognosis and attachments required under 30 CFR 250.64(b) through (d), 34 CFR 272.6 and (d), as appropriate) <div style="text-align: center;">   <b>PUBLIC INFORMATION COPY</b>                      REGIONAL SUPERVISOR                      FIELD OPERATION                      MINERALS MANAGEMENT SERVICE                 </div>				
26. CONTACT NAME <b>Soren Christiansen Bill Penrose</b>			27. TELEPHONE NUMBER <b>403-261-2464 907-258-3446</b>	
28. AUTHORIZING OFFICIAL (Type Name) <b>Soren Christiansen</b>			29. TITLE <b>Drilling Manager, Alaska</b>	
30. AUTHORIZING SIGNATURE <i>[Signature]</i> For: S. Christiansen			31. DATE <i>July 24/02</i>	
THIS SPACE FOR MMS USE ONLY				
APPROVED (With Attached Conditions <input checked="" type="checkbox"/> ) BY <i>[Signature]</i> TITLE: <b>RSFO</b> (Without Conditions) _____ <div style="text-align: right;">DATE: <b>NOV 7 2002</b></div>				
API WELL NO. ASSIGNED TO THIS WELL <u>55-201-00010-00</u>				
<p><b>PAPERWORK REDUCTION ACT STATEMENT:</b> The Paperwork Reduction Act of 1995 (44 U.S.C. 3501 et seq.) requires us to inform you that this information is being collected to obtain knowledge of equipment and procedures to be used in drilling operations. This information will be used by MMS District Supervisors to evaluate and approve or disapprove the adequacy of the equipment and/or procedures to safely perform the proposed drilling operation. Response to this request is mandatory (43 U.S.C. 1334). Proprietary data are covered under 30 CFR 250.18. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB Control Number.</p> <p>Public reporting burden for this form is estimated to average 2 hours per response, including the time for reviewing instructions, gathering and maintaining data, and completing and reviewing the form. Direct comments regarding the burden estimate or any other aspect of this form to the Information Collection Clearance Officer, Mail Stop 2053, Minerals Management Service, 381 Elden Street, Herndon, VA 20170-4817; and to the Office of Management and Budget, Office of Information and Regulatory Affairs, Desk Officer for the Department of the Interior (OMB No. 1010-0044), Washington, DC 20503.</p>				